PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE d to a collection of information unless it displays a valid OMB control number.

Order the Paperwork Reduction	Act or 1990, no person are red	uned to respond to a c				JIVID CONTROL NU	
Effective on 12/08 Fees pursuant to the Consolidated Approp	Amalia - ti hi	Complete if Known  Application Number 10/822,758-Conf. #2905					
				April 13, 2004			
FEE TRANS	Filing Date		Jin Woong KIM				
For FY 2		First Named Inventor Jin Woong KIM  Examiner Name J. M. Heckert		/1			
Applicant claims small entity sta		4700					
Applicant claims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT (\$) 930,00		Art Unit	7 tre Office				
TOTAL AMOUNT OF PAYMENT	Attorney Docket	Attorney Docket No. 0465-1527PUS1					
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
X   Deposit Account Deposit Account Number: 02-2448   Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
FI		EARCH FEES	EXAMIN	ATION FEES			
Application Type Fee (\$	Small Entity (i) Fee (\$) Fee	\$\frac{\text{Small Entity}}{\text{Fee (\$)}}	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)	
Utility 310	155 510	255	210	105			
Design 210	105 100	50	130	65			
Plant 210	105 310	155	160	80			
Reissue 310	155 510	255	620	310			
Provisional 210	105	0	0	0			
2. EXCESS CLAIM FEES Small Entity							
Fee Description Each claim over 20 (including Reissues)  Fee (\$) Fe						Fee (\$) 25	
Each independent claim over 3 (including Reissues)					210	105	
Multiple dependent claims 370 185							
Total Claims			tiple Dependent Claims				
30 - 38 = 0 : HP = highest number of total claims paid for	if greater than 20		Fee (\$) Fee Paid (\$)				
Indep. Claims Extra Claims	_	Paid (\$)				-	
	( =	(4)				]	
HP = highest number of independent claims	paid for, if greater than 3.					I	
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = /50 = (round <b>up</b> to a whole number) x =							
4. OTHER FEE(S)  Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00  1251 Extension for response within first month 120.00							
SUBMITTED BY A CO.O.							
ignature Registration No. (Attorney/Agent) 39,538 Telephone				Telephone	(703) 205-8000		
				Date	July 21, 2008		